

STATE OF CALIFORNIA
BUSINESS, TRANSPORTATION AND HOUSING AGENCY
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF CODES AND STANDARDS

MANUFACTURED HOME RECOVERY FUND
CLAIM FORM

DEPARTMENT USE ONLY

CLAIM FILE NO.:

DATE RECEIVED:

DEALER NO.:

MFG NO:

ACR NO:

ENVELOPE POSTMARK:

This claim form has been developed for the convenience of both the claimant and the Department of Housing and Community Development. Its use will expedite processing by the Department. The form need not be prepared by an attorney, nor is legal representation necessary or required to file a claim.

Type or print clearly. Provide all information requested. An incomplete or illegible claim form may delay the processing of your claim.

PART A - GENERAL INFORMATION AND INSTRUCTIONS FOR COMPLETING THE CLAIM

If your claim is based on a final judgment, the law requires that you file your Manufactured Home Recovery Fund claim within one year of receiving your final civil court judgment. If your claim is based on the bankruptcy of a Department licensee, you must file your claim within one year from the termination of the bankruptcy proceedings or one year from the date of sale, whichever occurs later.

If your claim is based on a civil judgment, complete PART A, Sections 1, 2, 3, and 4; PART B, and PART C.

If your claim is based on the bankruptcy of a Department licensee (dealer), complete PART A, Sections 1, 2, 3, and 5; and PART C.

SECTION 1 - CLAIMANT INFORMATION

NAME: _____

MAILING ADDRESS: _____
P. O. Box or Number and Street City State Zip Code

TELEPHONE: (____) _____ (____) _____
Home Work

LOCATION OF UNIT PURCHASED: _____
Number and Street City State Zip Code

REGISTERED OWNER (If other than claimant) _____

IF REPRESENTED BY AN ATTORNEY WITH REGARD TO THIS MANUFACTURED HOME RECOVERY FUND CLAIM, PLEASE FILL OUT THE FOLLOWING:

ATTORNEY NAME: _____ (____) _____
Telephone

ADDRESS: _____
P. O. Box or Number and Street City State Zip Code

SECTION 2 - PURCHASER/ SELLER INFORMATION

CHECK APPROPRIATE BOX:

☐

DEALER

☐

REAL ESTATE LICENSEE

☐

PRIVATE PARTY

NAME OF PURCHASER OR SELLER: _____

(CIRCLE APPROPRIATE ANSWER)

ADDRESS: _____

Number and Street

City

State

Zip Code

NAME OF DEALER OR

REAL ESTATE LICENSEE: _____

If different from "PURCHASER" OR "SELLER" listed above

ADDRESS: _____

Number and Street

City

State

Zip Code

SECTION 3 - DESCRIPTION OF UNIT PURCHASED

MAKE/MODEL NAME: _____ YEAR MODEL: _____ SERIAL NO.: _____

PURCHASED: (Check Appropriate Box)

☐

New

☐

Used

REGISTRATION DECAL OR LICENSE NO.: _____ DATE OF DELIVERY: _____

DEPT. OF HOUSING INSIGNIA OR HUD LABEL NO.: _____ DATE ESCROW CLOSED: _____

SECTION 4 - CLAIM INFORMATION BASED ON FINAL JUDGMENT

INSTRUCTIONS: If Claim is not based on a final judgment, do not complete Section 4, but proceed to Section 5 for a claim based on the bankruptcy of a Department Licensee.

The above-mentioned claimant hereby makes application for an order directing payment from the Manufactured Home Recovery Fund and alleges that:

1. On _____ a judgment was entered by _____
Date

Full Name and Address of Rendering Court

in Case No. _____, in my favor against _____
Debtor

for \$ _____ compensatory damages, \$ _____ court costs, and \$ _____
Amount Amount Amount

in attorney fees. I have attached as Exhibit A, a copy of the court-endorsed complaint I filed, Exhibit B, a certified copy of the court-endorsed final judgment, and as Exhibit C, copies of all other pertinent documents in the court's file on this case.

2. As of the date of this application, the above judgment has been or will be appealed. ☐ YES ☐ NO
If "YES", please tell us which party filed or will file the appeal and on what basis.

SECTION 4 - CLAIM INFORMATION BASED ON FINAL JUDGMENT (Continued)

3. The judgment is based on my (Check Appropriate Answer) PURCHASE ☐ SALE of a manufactured home which occurred on or about (date) _____. I have attached as Exhibit D, copies of all purchase documents concerning this transaction, e.g., manufacturer's invoice or order form, bill of sale, sales contract, purchase order, escrow instructions, letters you have written, received or other written information pertinent to the sales transaction.

4. I, _____, (Check Appropriate Answer) ☐ PURCHASED ☐ SOLD the manufactured
Claimant's Name
home for ☐ personal or family residential use or ☐ investment purposes.

5. The judgment is based on grounds of (Check All That Apply) ☐ failure to honor warranties or guarantees, ☐ fraud, ☐ willful misrepresentation of the kind or quality of the product sold, purchased or ☐ conversion by the defendant. I have attached as Exhibit E, a detailed statement of facts describing, in my own words, how the failure to honor warranties, fraud, misrepresentation, and/or conversion occurred and how my losses were calculated.

6. The total amount of the actual and direct loss I suffered through the failure to honor warranties or guarantees, fraud, willful misrepresentation of the kind or quality of product sold or purchased, or for conversion is \$ _____.
Amount

7. The total amount of court costs I incurred in pursuing action against the defendant is \$ _____, as verified by the Memorandum of Costs filed with the court, a copy of which is attached as Exhibit G.
Amount

8. The total amount of attorney's fees I incurred in pursuing this action is \$ _____ as verified by the copies of the attorney's billings attached as Exhibit H.
Amount

9. I am _____ I am not _____ the spouse of the judgment debtor or a person representing the spouse.
Check appropriate answer

10. As of the date of this application, I have received \$ _____ in partial satisfaction of my judgment from any and all sources.
Amount

SECTION 5 - CLAIM INFORMATION BASED ON BANKRUPTCY

The above-named claimant hereby makes application for an order directing payment from the Manufactured Home Recovery Fund and alleges that:

1. On _____, Chapter _____, Bankruptcy Case Number _____
Date Type
was filed in the _____ for
Name of Bankruptcy Court
the _____ by
Name of District

Name of Licensee d b a _____.

2. I have _____ have not _____ filed a proof of claim against this bankruptcy.
Check appropriate answer

3. I have received \$ _____ as a result of my claim against this bankruptcy.
Amount

4. The termination date of this bankruptcy is _____. I have attached as Exhibit I, a copy of all bankruptcy documents; e.g., bankruptcy filing, proof of claim, Schedule of Creditors, Notice and Hearing of Motion of Relief from Automatic Stay, discharge from bankruptcy.
Date

SECTION 5 - CLAIM INFORMATION BASED ON BANKRUPTCY (Continued)

5. I have attached as Exhibit D, copies of all purchase documents concerning this transaction, e.g., manufacturer's invoice or order form, bill of sale, sales contract, purchase order, escrow instructions, letters you have written, received or other written information pertinent to the sales transaction.

6. If the claim is based on failure to honor warranties or guarantees, and both the dealer and manufacturer have filed bankruptcy, I have attached as Exhibit E, copies of my written notice(s) to either the dealer or manufacturer of substantial defects in the manufactured home which occurred within one year of the date of delivery. (Written notice must have been provided within one year and ten days of the date of delivery). I have also attached as part of Exhibit E at least (2) itemized written estimates from licensed contractors to repair the identified substantial defects. If repair and or replacement of the substantial defects has been completed at your expense, submit itemized receipts.

7. I, _____, (Check Appropriate Answer) ☐ PURCHASED ☐ SOLD the
Claimant's Name
manufactured home for ☐ personal or family residential use or ☐ investment purposes.

8. The total amount of the actual and direct loss I incurred because of the licensee (Check all that Apply) ☐ failure to honor warranties or guarantees, ☐ fraud, ☐ willful misrepresentation of the kind or quality of the product sold or purchased, or ☐ conversion is \$ _____. I have attached as Exhibit F, a detailed statement of facts describing, in my own words, how the failure
Amount
to honor warranties, fraud, misrepresentation, and/or conversion occurred and my losses were calculated.

9. I am _____ I am not _____ the spouse of the bankrupt licensee or the person representing the spouse.
Check Appropriate Answer

PART B - COLLECTION EFFORTS

The law permits you to file a Manufactured Home Recovery Fund claim as soon as you have a final civil court judgment against the purchaser or seller. However, you cannot collect from the fund until you have made a diligent effort to collect on the judgment.

If you have completed your collection efforts, please provide as much of the information requested in Part B as soon as possible. If you have not finished attempting to collect from the purchaser or seller, you may provide the requested information at a later date. The Department will still accept your claim for filing if sufficient information is provided in Part A. No further action will be taken on your claim, however, until you provide the information requested in Part B.

SECTION 1 - JUDGMENT COLLECTION INFORMATION

1. I have pursued remedies and made the following searches and inquiries to learn whether the defendant possesses real or personal property or other assets which could be sold or applied in satisfaction of the judgment:

(a) Describe your searches, inquiries, and other efforts to locate any and all real or personal property owned or possessed by the judgment debtor, and attach as Exhibit J, all correspondence and documentation related to these searches and inquiries:

SECTION 1 - JUDGMENT COLLECTION INFORMATION (Continued)

(b) Describe all assets of the judgment debtor discovered as the result of (a) above:

(c) Writs of execution against property owned by the judgment debtor were issued on (list dates and specific piece of property):

(d) An abstract of judgment was recorded in the Office of the County Recorder of the following counties:

<u>COUNTY</u>	<u>DATE OF RECORDING</u>	<u>BOOK</u>	<u>PAGE</u>
<hr/>	<hr/>	<hr/>	<hr/>
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SECTION 1 - JUDGMENT COLLECTION INFORMATION (Continued)

(e) Describe any other searches, inquiries, and remedies pursued against the judgment debtor not already discussed above:

(IF YOU NEED ADDITIONAL SPACE, PLEASE ATTACH ADDITIONAL PAGES MARKED EXHIBIT K)

2. List any other real or personal property or other assets which have not already been sold or otherwise applied in satisfaction of the judgment discovered through your search and inquiries:

PART C - CERTIFICATION

I ask that the Department make its order directing that the Controller pay to the claimant from the Manufactured Home Recovery Fund the sum of \$_____.

In the event that I receive payment from the Fund, I, _____ hereby agree that, as a condition of payment, I will assign to the Department, up to the amount of payment I receive from the Fund, all of my right, title and interest to collect on my judgment or to collect from the debtor in bankruptcy, whichever applies.

I, _____, declare under penalty of perjury that the information given in this claim form and any attachment(s) hereto is true and correct to the best of my knowledge.

I understand that the purchaser and/or seller may be given a copy of this claim.

Signature: _____ Date: _____

LOCATION: _____
City County

WHEN COMPLETED, PLEASE MAIL THIS FORM AND ALL EXHIBITS TO:

State of California
Department of Housing and Community Development
Division of Codes and Standards
Manufactured Home Recovery Fund
P. O. Box 31
Sacramento, CA 95812-0031

YOU WILL BE NOTIFIED IN WRITING OF WHETHER YOU HAVE PROVIDED SUFFICIENT INFORMATION TO PERMIT FILING OF YOUR CLAIM.

IF YOU HAVE ANY QUESTIONS REGARDING THIS FORM OR THE MANUFACTURED HOME RECOVERY FUND IN GENERAL, PLEASE CALL US AT (916) 323-9801 OR TOLL-FREE AT 1-800-952-5275.

Should additional information become available which is pertinent to your claim, please send it to us at the above address.

Your claim will be processed on a first-come first-serve basis. Please be assured that the Department will make every effort to process your claim as soon as possible.